

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	PROCESSOR FOR ANALYZING TUBULAR STRUCTURE SUCH AS BLOOD VESSELS
Attorney Docket Number::	250750US2X
Total Drawing Sheets::	32

### INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Yasuhira
Family Name::	KONDO
City of Residence::	Otawara-Shi
Country of Residence::	Japan
Street of Mailing Address::	544-5-C102, Wakamatsu-Cho,
City of Mailing Address::	Otawara-Shi
State or Province of Mailing Address::	Tochigi-Ken
Country of Mailing Address::	Japan

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Shigeharu
Family Name::	OHYU
City of Residence::	Yaita-Shi
Country of Residence::	Japan
Street of Mailing Address::	1-13-7-202, Ougi-Cho,
City of Mailing Address::	Yaita-Shi
State or Province of Mailing Address::	Tochigi-Ken
Country of Mailing Address::	Japan

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Hitoshi
Family Name::	YAMAGATA
City of Residence::	Otawara-Shi
Country of Residence::	Japan
Street of Mailing Address::	95-344, Kajiya,
City of Mailing Address::	Otawara-Shi
State or Province of Mailing Address::	Tochigi-Ken
Country of Mailing Address::	Japan
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Mexico
Status::	FULL CAPACITY
Given Name::	Arturo
Family Name::	CALDERON
City of Residence::	Otawara-Shi
Country of Residence::	Japan
Street of Mailing Address::	1-11-29, Murasakizuka,
City of Mailing Address::	Otawara-Shi
State or Province of Mailing Address::	Tochigi-Ken
Country of Mailing Address::	Japan
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Japan
Status::	FULL CAPACITY
Given Name::	Tomohiro
Family Name::	KAWASAKI
City of Residence::	Otawara-Shi
Country of Residence::	Japan
Street of Mailing Address::	1-15-16-E2, Sumiyoshi-Cho,
City of Mailing Address::	Otawara-Shi
State or Province of Mailing Address::	Tochigi-Ken
Country of Mailing Address::	Japan

Applicant Authority Type:: INVENTOR  
 Primary Citizenship Country:: Japan  
 Status:: FULL CAPACITY  
 Given Name:: Atsuko  
 Family Name:: SUGIYAMA  
 City of Residence:: Kuroiso-Shi  
 Country of Residence:: Japan  
 Street of Mailing Address:: 1087-1342, Nabekake,  
 City of Mailing Address:: Kuroiso-Shi  
 State or Province of Mailing Address:: Tochigi-Ken  
 Country of Mailing Address:: Japan

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
2003-079117	Japan	03/20/03	YES

#### ASSIGNMENT INFORMATION

Assignee Name:: KABUSHIKI KAISHA TOSHIBA  
 Street of Mailing Address:: 1-1, Shibaura 1-Chome,  
 Minato-Ku,  
 City of Mailing Address:: Tokyo  
 Country of Mailing Address:: Japan  
 Assignee Name:: TOSHIBA MEDICAL SYSTEMS  
 CORPORATION  
 Street of Mailing Address:: 1385, Shimoishigami,  
 City of Mailing Address:: Otawara-Shi  
 State or Province of Mailing Address:: Tochigi-Ken  
 Country of Mailing Address:: Japan